



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3469

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|--|
| SERIAL NUMBER 10/623,310 | FILING OR 371(c) DATE 07/18/2003 RULE | CLASS 422 | GROUP ART UNIT 1743 | ATTORNEY DOCKET NO. DCS-9178 |
|------------------------------------|---|---------------------|-------------------------------|--|

APPLICANTS

Peter Louis Gebrian, Wilmington, DE;
Timothy Patrick Evers, Wilmington, DE;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
10/21/2003

| | | | | |
|---|-----------------------------------|--------------------------------|------------------------------|------------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY DE | SHEETS DRAWING 9 | TOTAL CLAIMS 7 | INDEPENDENT CLAIMS 1 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> | | | | |

ADDRESS

34500

TITLE

Random access reagent delivery system for use in an automatic clinical analyzer

| | | |
|---------------------------------------|---|---|
| FILING FEE RECEIVED 750 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time.) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|---------------------------------------|---|---|